

## RETURN POST CARD

ATTORNEY DOCKET 450103-05760

Applicant: Christopher J. MOULIOS

Appl. No.: 09/835,253

Filing Date: April 13, 2001

Entitled: SYSTEM FOR AND METHOD OF DETERMINING THE PERIOD OF RECURRING EVENTS WITHIN A RECORDED SIGNAL.

## Enclosed:

- Patent Application Transmittal  
 Patent Application  
<sub>(</sub> \_\_\_\_\_ pages, \_\_\_\_\_ sheets of drawings)  
 Provisional Patent Application Cover Sheet  
 Provisional Patent Application ( \_\_\_\_\_ pages)  
 RCE Transmittal  
 Preliminary Amendment  
 Amendment ( final)  
 Fee Transmittal  
 Return Post Card  
 Check (No. 036640) in the amount of \$1,810.00  
 Other: \_\_\_\_\_

- Certificate of Express Mailing  
<sub>(Express Mail No. EV 647101330 US)</sub>  
 IDS  
 USPTO Form 1449 and References  
 Priority Document(s)  
 Nonpublication Request  
 Declaration/Power of Attorney  
 Signed  Unsigned  
 Assignment  
 Assignment Recordation Cover Sheet

Today's Date: 12/06/05

Due Date: 12/06/05

SSL:ck

## RETURN POST CARD

ATTORNEY DOCKET 450103-05760

Applicant: Christopher J. MOULIOS

Appl. No.: 09/835,253

Filing Date: April 13, 2001

Entitled: SYSTEM FOR AND METHOD OF DETERMINING THE PERIOD OF RECURRING EVENTS WITHIN A RECORDED SIGNAL

## Enclosed:

- Patent Application Transmittal  
 Patent Application  
<sub>(</sub> \_\_\_\_\_ pages, \_\_\_\_\_ sheets of drawings)  
 Provisional Patent Application ~~Cover Sheet~~  
 Provisional Patent Application ( \_\_\_\_\_ pages)  
 RCE Transmittal  
 Preliminary Amendment  
 Amendment ( final)  
 Fee Transmittal  
 Return Post Card  
 Check (No. 036640) in the amount of \$1,810.00  
 Other: \_\_\_\_\_

- Certificate of Express Mailing  
<sub>(Express Mail No. EV 647101330 US)</sub>  
 IDS  
 USPTO Form 1449 and References  
 Priority Document(s)  
 Nonpublication Request  
 Declaration/Power of Attorney  
 Signed  Unsigned  
 Assignment  
 Assignment Recordation Cover Sheet

Today's Date: 12/06/05

Due Date: 12/06/05

SSL:ck

## BEST AVAILABLE COPY

03/21/2006 15:49 FAX 858 731 5001

FROMMER LAWRENCE &amp; HAUG

021

PRESS HARD. YOU ARE MAKING 3 COPIES.



EV 647101330 US

ORIGIN (POSTAL SERVICE USE ONLY)		
PO ZIP Code <i>92192</i>	Day of Delivery <input type="checkbox"/> Next <input type="checkbox"/> 2nd <input type="checkbox"/> 3rd <input type="checkbox"/> 4th Day	Postage \$ <i>B 65</i>
Date Accepted <i>3/21/06</i>	Scheduled Date of Delivery Month <i>12</i> Day <i>8</i>	Return Receipt Fee
Mo. Day Year <i>Mo. Day</i>	Scheduled Time of Delivery Noon <input checked="" type="checkbox"/> 3 PM	COD Fee Insurance Fee \$ \$
Time Accepted <i>2:31</i>	Military <input type="checkbox"/> And Day <input type="checkbox"/> 3rd Day	Total Postage & Fees \$ <i>B 65</i>
Pmt Rate <input type="checkbox"/> or Weight <i>2.02</i>	Intl Alpha Country Code <i>US</i>	Acceptance Emp. Initials <i>JL</i>



UNITED STATES POSTAL SERVICE

Customer Copy  
Label 11-F, April 2004

Post Office To Addressee



DELIVERY (POSTAL USE ONLY)		
Delivery Attempt Mo. Day	Time <input type="checkbox"/> AM <input type="checkbox"/> PM	Employee Signature
Delivery Attempt Mo. Day	Time <input type="checkbox"/> AM <input type="checkbox"/> PM	Employee Signature
Delivery Date Mo. Day	Time <input type="checkbox"/> AM <input type="checkbox"/> PM	Employee Signature

## CUSTOMER USE ONLY

## METHOD OF PAYMENT:

Orange Mail Corporate Acct. No.:  
*12345678901234567890*

FROM: PLEASE PRINT: PHONE 858.731-5000  
 Samuel S. Lea  
 Frommer Lawrence & Haug LLP  
 4660 La Jolla Village Drive  
 Suite 850  
 San Diego, CA 92122  
 (450103-05760)

Payer/Agency Acct. No. or  
Postal Service Acct. No.

TO: (PLEASE PRINT) PHONE \_\_\_\_\_

Mail Stop RCE  
 Commissioner for Patents  
 P.O. Box 1450  
 Alexandria, VA 22313-1450

FOR PICKUP OR TRACKING: VISIT [www.usps.com](http://www.usps.com) or Call 1-800-222-1811

**BEST AVAILABLE COPY**

03/21/2006 15:50 FAX 858 731 5001

FROMMER LAWRENCE &amp; HAUG

022

**FROMMER LAWRENCE & HAUG LLP**745 FIFTH AVENUE  
NEW YORK, NY 10151**036640**December 6, 2005

1-210428

PAY TO THE COMMISSIONER OF PATENTS AND TRADEMARKS \$ 1,810.00  
ORDER OF

One Thousand Eight Hundred Ten and 00/100 DOLLARS

CITIBANK, N.A.  
Private Banking Division  
153 EAST 53rd STREET, 20th FL.  
NEW YORK, NY 10043

FROMMER LAWRENCE &amp; HAUG LLP

NON-NEGOTIABLE

CHARGE ANY ADD'L FEES TO DEPOSIT ACCT. #50-0320

FROMMER LAWRENCE &amp; HAUG LLP

DETACH AND RETAIN THIS STATEMENT  
THE ATTACHED CHECK IS IN PAYMENT OF ITEMS DESCRIBED BELOW.  
IF NOT CORRECT PLEASE NOTIFY US PROMPTLY. NO RECEIPT DESIRED.

APPLICANT	Christopher J. MOULIOS
SERIAL NO.	09/375,253
FL & H DOCKET NO.	450103-05760
TITLE	SYSTEM FOR AND METHOD OF DETERMINING THE PERIOD OF

RECURRING EVENTS WITHIN A RECORDED SIGNAL

- |   |  |
|---|--|
| <input type="checkbox"/> APPEAL BRIEF   | <input type="checkbox"/> PETITION FEE              |
| <input type="checkbox"/> APPEAL FEE   | <input type="checkbox"/> PETITION FOR CANCELLATION |
| <input type="checkbox"/> CERTIFICATE OF CORRECTION  | <input type="checkbox"/> PETITION TO REVIVE        |
| <input type="checkbox"/> DISCLAIMER   | <input type="checkbox"/> RECORDING FEE             |
| <input checked="" type="checkbox"/> EXTENSION OF TIME (3 months)  | <input type="checkbox"/> REQUEST FOR ORAL HEARING  |
| <input type="checkbox"/> FEE FOR ADDED CLAIMS   | <input type="checkbox"/> SEC. 8 TM DECLARATION FEE |
| <input checked="" type="checkbox"/> FILING FEE (SCE)  | <input type="checkbox"/> STATEMENT OF USE          |
| <input type="checkbox"/> ISSUE FEE  | <input type="checkbox"/> TM RENEWAL                |
| <input type="checkbox"/> MAINTENANCE FEE  | <input type="checkbox"/>                           |
| <input type="checkbox"/> MISSING PARTS  | <input type="checkbox"/>                           |
| <input type="checkbox"/> NOTICE OF OPPOSITION   | <input type="checkbox"/>                           |
| <input checked="" type="checkbox"/> PLEASE CHARGE ANY ADDITIONAL FEES OR CREDIT OVER PAYMENT TO DEPOSIT ACCOUNT NO. 50-0320 |  |

## CHARGE TO

NAME OF CLIENT OR ACCOUNT	FILE NO.	ATTORNEY	AMOUNT
SCA	450103-05760	SSL	1,810.00

TO: USPTO

RECEIVED  
CENTRAL FAX CENTER

FROM: Samuel S. Lee

MAR 21 2006

FAX: 571-273-8300

DATE: 3/21/06

RE: US Patent Appln # 09/835,253  
Filing Date 4/13/01

EXAMINER: SELLERS, Daniel R.

Art Unit 2644

# of Pages 23

CONTENTS: RCE & PRELIMINARY  
AMENDMENT

# BEST AVAILABLE COPY

03/21/2006 15:44 FAX 858 731 5001

FROMMER LAWRENCE & HAUG

002

## RETURN POST CARD

ATTORNEY DOCKET 450103-05760

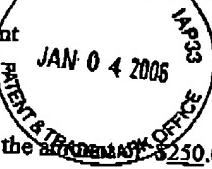
### RETURN POST CARD

ATTORNEY DOCKET 450103-05760

- Applicant: Christopher J. MOULIOS  
Appl. No.: 09/835,253  
Filing Date: April 13, 2001  
Entitled: SYSTEM FOR AND METHOD OF DETERMINING THE PERIOD OF RECURRING EVENTS WITHIN A RECORDED SIGNAL
- Enclosed:
- Patent Application Transmittal  
 Patent Application  
(       pages,        sheets of drawings)  
 Provisional Patent Application Cover Sheet  
 Provisional Patent Application (       pages)  
 RCE Transmittal  
 Preliminary Amendment  
 Amendment (final)  
 Fee Transmittal  
 Return Post Card  
 Check (No. 036668) in the amount of \$250.00  
 Other: \_\_\_\_\_
- Certificate of Express Mailing  
(Express Mail No. EQ 294622735 US)  
 IDS  
 USPTO Form 1441 and References  
 Priority Document(s)  
 Nonpublication Request  
 Declaration/Power of Attorney  
 Signed    Unsigned  
 Assignment  
 Assignment Recorcation Cover Sheet

Today's Date: 01/04/06

SSL:ck



**BEST AVAILABLE COPY**

03/21/2006 15:45 FAX 858 731 5001

FROMMER LAWRENCE &amp; HAUG

003

**Customer Copy**  
Label 11-B, March 2004

 <b>EQ 294622735 US</b>		
<b>ORIGIN (POSTAL SERVICE USE ONLY)</b> PO ZIP Code <b>92132</b> Day of Delivery <b>1</b> Postage <b>\$ 13.65</b> <input type="checkbox"/> Next <input type="checkbox"/> 2nd <input type="checkbox"/> 3rd Del Day Scheduled Date of Delivery Return Receipt Fee Month <b>1 - 6</b> \$ Scheduled Time of Delivery COD Fee Insurance Fee <input type="checkbox"/> Noon <input checked="" type="checkbox"/> 1PM <input type="checkbox"/> 2PM Military Total Postage & Fees <input type="checkbox"/> 2nd Day <input type="checkbox"/> 3rd Day <b>\$ 13.65</b> Int'l Alpha Country Code Acceptance Emp. Initials <b>LMA</b> Flat Rate <input type="checkbox"/> or Weight <b>1.40</b> lbs <b>1.40</b>		
<b>FROM:</b> (PLEASE PRINT) <b>PHONE ( 858 ) 731-5000</b> <b>Samuel S. Lee</b> <b>Frommer Lawrence &amp; Haug LLP</b> <b>4660 La Jolla Village Drive</b> <b>Suite 850-</b> <b>San Diego, CA 92122</b> <b>(450103-05760)</b>		
<b>FOR PICKUP OR TRACKING</b> Visit <b>WWW.USPS.COM</b> Call 1-800-222-1811		
		

**EXPRESS  
MAIL**  
UNITED STATES POSTAL SERVICE •

**Customer Copy**  
Label 11-B, March 2004

**Post Office To Addressee**

<b>DELIVERY (POSTAL USE ONLY)</b> Delivery Attempt Time <input type="checkbox"/> AM <input type="checkbox"/> PM Mo. <b>Day</b> Delivery Attempt Time <input type="checkbox"/> AM <input type="checkbox"/> PM Employee Signature Mo. <b>Day</b> Delivery Date Time <input type="checkbox"/> AM <input type="checkbox"/> PM Employee Signature Mo. <b>Day</b> <b>1</b> <b>AM</b> <b>CAN DIEGO CALIFORNIA</b> 											
<b>CUSTOMER USE ONLY</b> PAYMENT BY ACCOUNT Express Mail Corporate Acct. No. Federal Agency Acct. No. or Postal Service Acct. No. <b>TO: (PLEASE PRINT) PHONE ( )</b> <b>Commissioner for Patients</b> <b>P.O. Box 1450</b> <b>Alexandria, VA 22313-1450</b>											
ZIP + 4 (U.S. ADDRESSES ONLY. DO NOT USE FOR FOREIGN POSTAL CODES) <table border="1"> <tr> <td><b>2</b></td> <td><b>2</b></td> <td><b>3</b></td> <td><b>1</b></td> <td><b>3</b></td> <td><b>+</b></td> <td><b>1</b></td> <td><b>4</b></td> <td><b>5</b></td> <td><b>0</b></td> </tr> </table> FOR INTERNATIONAL DESTINATIONS, WRITE COUNTRY NAME BELOW: <input type="text"/>		<b>2</b>	<b>2</b>	<b>3</b>	<b>1</b>	<b>3</b>	<b>+</b>	<b>1</b>	<b>4</b>	<b>5</b>	<b>0</b>
<b>2</b>	<b>2</b>	<b>3</b>	<b>1</b>	<b>3</b>	<b>+</b>	<b>1</b>	<b>4</b>	<b>5</b>	<b>0</b>		

**BEST AVAILABLE COPY**

03/21/2006 15:45 FAX 858 731 5001

FROMMER LAWRENCE &amp; HAUG

004

**FROMMER LAWRENCE & HAUG LLP**745 FIFTH AVENUE  
NEW YORK, NY 10151**036668**January 4, 2005

1-1-210428

PAY TO THE  
ORDER OF**COMMISSIONER OF PATENTS AND TRADEMARKS**

\$ 250.00

Two Hundred Fifty and 00/100

DOLLARS

CITIBANK, N.A.  
Private Banking Division  
153 EAST 53rd STREET, 20th FL  
NEW YORK, NY 10043

FROMMER LAWRENCE &amp; HAUG LLP

CHARGE ANY ADD'L FEES TO DEPOSIT ACCT. #50-0320

NON-NEGOTIABLE

FROMMER LAWRENCE &amp; HAUG LLP

**DETACH AND RETAIN THIS STATEMENT**  
 THE ATTACHED CHECK IS IN PAYMENT OF ITEMS DESCRIBED BELOW.  
 IF NOT CORRECT PLEASE NOTIFY US PROMPTLY. NO RECEIPT DESIRED.

APPLICANT Christopher J. MOULIOS

SERIAL NO. 09/635,253

FL &amp; H DOCKET NO. 450103-05760

TITLE SYSTEM FOR AND METHOD OF DETERMINING THE PERIOD OF

**RECURRING EVENTS WITHIN A RECORDED SIGNAL**

- |   |  |
|---|--|
| <input type="checkbox"/> APPEAL BRIEF   | <input type="checkbox"/> PETITION FEE              |
| <input type="checkbox"/> APPEAL FEE   | <input type="checkbox"/> PETITION FOR CANCELLATION |
| <input type="checkbox"/> CERTIFICATE OF CORRECTION  | <input type="checkbox"/> PETITION TO REVIVE        |
| <input type="checkbox"/> DISCLAIMER   | <input type="checkbox"/> RECORDING FEE             |
| <input type="checkbox"/> EXTENSION OF TIME  | <input type="checkbox"/> REQUEST FOR ORAL HEARING  |
| <input checked="" type="checkbox"/> FEE FOR ADDED CLAIMS  | <input type="checkbox"/> SEC. 8 TM DECLARATION FEE |
| <input type="checkbox"/> FILING FEE   | <input type="checkbox"/> STATEMENT OF USE          |
| <input type="checkbox"/> ISSUE FEE  | <input type="checkbox"/> TM RENEWAL                |
| <input type="checkbox"/> MAINTENANCE FEE  | <input type="checkbox"/>                           |
| <input type="checkbox"/> MISSING PARTS  | <input type="checkbox"/>                           |
| <input type="checkbox"/> NOTICE OF OPPOSITION   | <input type="checkbox"/>                           |
| <input checked="" type="checkbox"/> PLEASE CHARGE ANY ADDITIONAL FEES OR CREDIT OVER PAYMENT TO DEPOSIT ACCOUNT NO. 50-0320 |  |

**CHARGE TO**

NAME OF CLIENT OR ACCOUNT	FILE NO.	ATTORNEY	AMOUNT
SCA	450103-05760	SSL	250.00

PATENT  
450103-05760

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s) : Christopher J. MOULIOS  
 Serial No. : 09/836,253  
 For : SYSTEM FOR AND METHOD OF DETERMINING THE PERIOD OF RECURRING EVENTS WITHIN A RECORDED SIGNAL  
 Filed : April 13, 2001  
 Examiner : SELLERS, Daniel R.  
 Art Unit : 2644

RECEIVED  
CENTRAL FAX CENTER

MAR 21 2006

COMMISSIONER FOR PATENTS  
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an amendment in the above-identified application.

- No additional fee is required.  
 The fee has been calculated as shown below.  
 This is an application of a small entity under 37 CFR 1.9(f), and the amounts shown in parentheses apply.

## Claims as Amended

(1)	(2) Claims remaining after amendment	(3)	(4) Highest number previously paid for	(5) Present extra	(6) Rate	(7) Additional fee
Total claims	21	Minus	20 =	1 x	\$5(25)	= \$50.00
Independent claims	4	Minus	3 =	1 x	\$20(100)	= \$200.00
Total additional fee for this amendment						= \$250.00

- If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.  
 If the highest number of total claims previously paid for is less than 20, write "20" in this space.  
 If the highest number of independent claims previously paid for is less than 3, write "3" in this space.
- This application contains a multiple dependent claim. The required fee of \$360 (\$180) has been previously paid , or is paid herewith .
- This response is being filed within the mon th following the expiration of the term originally set therefor.  
 This is a petition to request a - month extension of time. A check covering the cost of the petition is enclosed.
- A check in the amount of \$ 250.00 is attached, which covers the cost of  
 additional claims and  - month petition for extension of time.
- Charge \$    to Deposit Account No. 50-0320.
- Please charge any additional fees incurred by reason of this response or credit any overpayment to Deposit / account No. 50-0320.

EXPRESS MAILFROMMER LAWRENCE & HAUG, LLP  
Attorneys for Applicant(s)

Mailing Label Number: EO 294622735 US

Date of Deposit: January 4, 2006

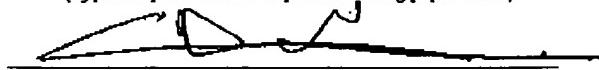
I hereby certify that this paper or fee is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" Service under 37 CFR 1.10 on the date indicated above and is addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

By: Samuel S. Lee  
Reg. No. 42,791  
Tel. (858) 731-5000



Chiaki Kokka

(Typed or printed name of person mailing paper or fee)



(Signature of person mailing paper or fee)